CERTIFICATE OF MAILING				
I hereby certify that this correspondence is being deposited with the United St. Washington, D.C. 20231.	ates Postal Service as first class mail in	an chvolope a	ddressed to: Commissioner for Patents,	
Typed or Printed Name Susan M. Alessi	-	<del>-</del>		
Signature Sum a	Sum alessi		02-07-2003	
REVOCATION OF POWER OF ATTORNEY/POWER OF ATTORNEY OR AUTHORIZATION OF AGENT  Commissioner for Patents Washington, D.C. 20231	Attorney Docket	VIT	VITA-003	
	First Named Inventor	LU,	LU, PETER S.	
	Application Number	09/7	09/737,246	
	Filing Date	Dece	December 13, 2000	
	Group Art Unit			
	Examiner Name			
	Title: "CLASP-3 TRANSMEMBRANE PROTEIN"			
I hereby revoke all previous powers of atto	orney or authorizations of	f agent giv	en in the aboye-identified	
application and hereby appoint Practitioners at:			$C_{\infty}$	
24353	LAI <b>24353</b> F	b.C		
whose address is: Bozicevic, Field & Francis LLP, 20 or agent(s) to prosecute the application identified about of any control	ove, to prepare and file am	200, Men	to inspect and make conject hereof	
and of any papers in any appellate or in er partes p generally to conduct all business in the United Str application or any application that claims priority from	roceedings in which the A	Annlication	may be or become involved and	
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STATEMENT UNDER 37 CFR § 3.73(b)				
In a cordance with 37 CFR §3.73(b) I hereby certify that I am empowered to act on behalf of the Assignee of the above-identified patent application. The A signment was recorded with the U.S. Patent Office on May 7, 2001 at Reel 011775. Frames to 0536.				
I declare that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code § 1001 and that such willful false statements may jeopardize the validity of the above referenced application or any patent resulting from that application.				
I am the:  Aprlicant; or  X Assigner of record of the entire interest Atterney of record				
SIGNATURE of Appli	icant, Assignee or Atto	rney of R	Record	
Name Peter 5. Lu				
Signature 12				
Date 2/5/03				
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